

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Adams for Congress

ADDRESS (number and street)

PO Box 878

Check if different  
than previously  
reported. (ACC)

Des Moines

IA

50304

2. FEC IDENTIFICATION NUMBER ▼

C

C00580282

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

IA

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
06 / 08 / 2015

through

M M / D D / Y Y Y Y  
09 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Chay Williams

Signature of Treasurer

Chay Williams

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
11 / 25 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Adams for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	23946.08	23946.08
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	23946.08	23946.08
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	17600.30	17600.30
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	17600.30	17600.30
8. Cash on Hand at Close of Reporting Period (from Line 27).....	6185.78	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	13250.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

PAGE 3 / 22

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Adams for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	5

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:**

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

19221.31

19221.31

(ii) Unitemized.....

4724.77

4724.77

(iii) TOTAL of contributions from individuals ▶

23946.08

23946.08

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

23946.08

23946.08

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

23946.08

23946.08

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 22

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	17600.30	17600.30
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	160.00	160.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	17760.30	17760.30

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	23946.08
25. SUBTOTAL (add Line 23 and Line 24).....	23946.08
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	17760.30
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6185.78

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 22  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Adams for Congress**

Full Name (Last, First, Middle Initial) <b>John Allen</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>09 / 17 / 2015</div> </div>	
Mailing Address 515 River Oaks Drive		Transaction ID : SA11AI.4212	
City River Forest	State IL		Zip Code 60305
FEC ID number of contributing federal political committee. <div>C</div>			
Name of Employer Family Health Network	Occupation Attorney		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Amount of Each Receipt this Period <div> <div></div> <div>300.00</div> </div>	
Election Cycle-to-Date <div> <div></div> <div>300.00</div> </div>		1509174000	

Full Name (Last, First, Middle Initial) <b>Amos Anderson</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>09 / 28 / 2015</div> </div>	
Mailing Address 3758 Swoboda Road		Transaction ID : SA11AI.4230	
City Verona	State WI		Zip Code 53593
FEC ID number of contributing federal political committee. <div>C</div>			
Name of Employer 100 Black Men of Madison	Occupation President		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Amount of Each Receipt this Period <div> <div></div> <div>300.00</div> </div>	
Election Cycle-to-Date <div> <div></div> <div>300.00</div> </div>		1509284000	

Full Name (Last, First, Middle Initial) <b>Rania Batrice</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>08 / 24 / 2015</div> </div>	
Mailing Address 2824 Grand Ave		Transaction ID : SA11AI.4336	
City Des Moines	State IA		Zip Code 50312
FEC ID number of contributing federal political committee. <div>C</div>			
Name of Employer Self	Occupation Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Amount of Each Receipt this Period <div> <div></div> <div>1121.31</div> </div>	
Election Cycle-to-Date <div> <div></div> <div>1131.31</div> </div>		In-kind - Office Supplies, Transportation, & Food	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<div> <div></div> <div>1721.31</div> </div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div> <div></div> </div>

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

Harry Bookey

A.

Mailing Address 11 SW 51st Street

City

Des Moines

State

IA

Zip Code

50312-2139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BH Equities

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2015

Transaction ID : SA11AI.4159

Amount of Each Receipt this Period

1000.00

1507310001

Full Name (Last, First, Middle Initial)

Darron Brawner

B.

Mailing Address P.O. Box 670

City

Carolyn

State

IA

Zip Code

42327

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2015

Transaction ID : SA11AI.4143

Amount of Each Receipt this Period

500.00

1507280001

Full Name (Last, First, Middle Initial)

Frederick Buie

C.

Mailing Address 4848 Oakwood Lane

City

West Des Moines

State

IA

Zip Code

50265

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Keystone Electric

Occupation

Engineer/Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2015

Transaction ID : SA11AI.4157

Amount of Each Receipt this Period

2700.00

1507310001

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4200.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

A. Ora Conliffe

Mailing Address 135 Silverthorn Drive

City

Tyrone

State

GA

Zip Code

30290

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		08		2015

Transaction ID : SA11AI.4101

Amount of Each Receipt this Period

500.00

1507084000

Full Name (Last, First, Middle Initial)

B. Nathan J. Cox

Mailing Address 3151 S St., Apt 220

City

Sacramento

State

CA

Zip Code

95816

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		23		2015

Transaction ID : SA11AI.4311

Amount of Each Receipt this Period

250.00

1506230001

Full Name (Last, First, Middle Initial)

C. Kelly Ferguson

Mailing Address 12302 Townsend Avenue

City

Urbandale

State

IA

Zip Code

50323

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Meyocks GroupOccupation  
Marketing Research

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		09		2015

Transaction ID : SA11AI.4103

Amount of Each Receipt this Period

500.00

1507094000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 22

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Adams for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Don Goens</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>27</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	09		27		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
09		27		2015									
Mailing Address 3037 Lawrence cr		<b>Transaction ID : SA11AI.4226</b>											
City Flossmoor	State IL	Zip Code 60422	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>500.00</td> </tr> </table>					500.00					
				500.00									
FEC ID number of contributing federal political committee. <div>C</div>		1509274000											
Name of Employer FSH Communications	Occupation Iwner												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>500.00</td> </tr> </table>					500.00							
				500.00									
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Lynn Graves</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>25</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	07		25		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
07		25		2015									
Mailing Address 65 Fox Landing		<b>Transaction ID : SA11AI.4137</b>											
City Waukee	State IA	Zip Code 50263	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>250.00</td> </tr> </table>					250.00					
				250.00									
FEC ID number of contributing federal political committee. <div>C</div>		1507254000											
Name of Employer None	Occupation None												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>250.00</td> </tr> </table>					250.00							
				250.00									
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Robert Harris</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>24</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	08		24		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
08		24		2015									
Mailing Address 4082 Sequoyah Road		<b>Transaction ID : SA11AI.4181</b>											
City Oakland	State CA	Zip Code 94605	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>250.00</td> </tr> </table>					250.00					
				250.00									
FEC ID number of contributing federal political committee. <div>C</div>		1508240001											
Name of Employer Retired	Occupation Attorney												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>250.00</td> </tr> </table>					250.00							
				250.00									
<b>SUBTOTAL</b> of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="4"></td> <td>1000.00</td> </tr> </table>						1000.00					
				1000.00									
<b>TOTAL</b> This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="4"></td> <td></td> </tr> </table>											



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 22

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John Hatch**

Mailing Address 696 18th Street

City State Zip Code  
Des Moines IA 50314-1078

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Real Estate

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		08		2015

Transaction ID : SA11AI.4195

Amount of Each Receipt this Period

1500.00
1509090001

**B.** Full Name (Last, First, Middle Initial)  
**Cain Hayes**

Mailing Address 4550 Sixpenny Circle

City State Zip Code  
Dublin OH 43016

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Occupation Divisional President

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		03		2015

Transaction ID : SA11AI.4163

Amount of Each Receipt this Period

2700.00
1508033000

**C.** Full Name (Last, First, Middle Initial)  
**Thomas Hill**

Mailing Address 3715 Grayhawk Avenue

City State Zip Code  
Ames IA 50010

FEC ID number of contributing federal political committee. **C**

Name of Employer Iowa State University Occupation Professor

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		24		2015

Transaction ID : SA11AI.4218

Amount of Each Receipt this Period

300.00
1509240001

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

Charlotte Hubbell

A.

Mailing Address 2300 Terrace Road

City

Des Moines

State

IA

Zip Code

50312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Business owner/Community Leader

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2015

Transaction ID : SA11AI.4149

Amount of Each Receipt this Period

2700.00

1507280002

Full Name (Last, First, Middle Initial)

Frederick Hubbell

B.

Mailing Address 2300 Terrace Road

City

Des Moines

State

IA

Zip Code

50312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2015

Transaction ID : SA11AI.4309

Amount of Each Receipt this Period

1000.00

1506080001

Full Name (Last, First, Middle Initial)

G. David Hurd

C.

Mailing Address 300 Walnut Street Unit 183

City

Des Moines

State

IA

Zip Code

50309-2244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2015

Transaction ID : SA11AI.4179

Amount of Each Receipt this Period

250.00

1508240001

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3950.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

Matthew Jeter

Mailing Address 2616 NE Horseshoe Dr

City

Lee's Summit

State

MO

Zip Code

64086

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		22		2015

Transaction ID : SA11AI.4129

Amount of Each Receipt this Period

250.00

1507234000

Full Name (Last, First, Middle Initial)

James Lindberg

Mailing Address 1616 38th Street

City

Des Moines

State

IA

Zip Code

50310-4541

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
College Professor - Cheistry

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		28		2015

Transaction ID : SA11AI.4145

Amount of Each Receipt this Period

250.00

1507280001

Full Name (Last, First, Middle Initial)

Thomas Phillips

Mailing Address 31398 Chardonay Point

City

Wauke

State

IA

Zip Code

50263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DuPontOccupation  
Manager

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		29		2015

Transaction ID : SA11AI.4238

Amount of Each Receipt this Period

300.00

1509294000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Adams for Congress**Full Name (Last, First, Middle Initial)  
**A. Margaret Schilling**

Mailing Address 3120 E Titus Ave

City	State	Zip Code
Des Moines	IA	50320

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		03		2015

Transaction ID : SA11AI.4165

Amount of Each Receipt this Period

250.00

1508034000

Full Name (Last, First, Middle Initial)  
**B. Nathaniel Sutton**

Mailing Address 10 Thornwood Drive

City	State	Zip Code
Flossmoor	IL	60422-1950

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sutton Auto TeamOccupation  
Sales Executive

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		24		2015

Transaction ID : SA11AI.4216

Amount of Each Receipt this Period

300.00

1509240001

Full Name (Last, First, Middle Initial)  
**C. Keith Whipple**

Mailing Address PO Box 10838

City	State	Zip Code
Cedar Rapids	IA	52410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Writer

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		20		2015

Transaction ID : SA11AI.4123

Amount of Each Receipt this Period

250.00

1507204000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 22  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Larry Wilson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 15 / 2015
Mailing Address 1902 80th Street		Transaction ID : SA11AI.4113
City Windsor Heights	State IA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Information Requested	Occupation Information Requested	1507154000
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. Connie Wimer</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 06 / 2015
Mailing Address 100 Fourth Street		Transaction ID : SA11AI.4167
City Des Moines	State IA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer None	Occupation Retired	1508064000
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	19221.31

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

**A. Advantage Payroll**

Mailing Address 126 Merrow Rd.

City	State	Zip Code
Auburn	ME	04210-8896

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Disbursement this Period

1846.76
---------

Transaction ID : SB17.4280

**B. Advantage Payroll**

Mailing Address 126 Merrow Rd.

City	State	Zip Code
Auburn	ME	04210-8896

Purpose of Disbursement  
Payroll Service Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Disbursement this Period

86.12
-------

Transaction ID : SB17.4282

**c. Advantage Payroll**

Mailing Address 126 Merrow Rd.

City	State	Zip Code
Auburn	ME	04210-8896

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Disbursement this Period

1483.62
---------

Transaction ID : SB17.4283

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3416.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

**A. Advantage Payroll**

Mailing Address 126 Merrow Rd.

City	State	Zip Code
Auburn	ME	04210-8896

Purpose of Disbursement  
Payroll Service Fee

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Disbursement this Period

82.24
-------

Transaction ID : SB17.4294

**B. Advantage Payroll**

Mailing Address 126 Merrow Rd.

City	State	Zip Code
Auburn	ME	04210-8896

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Disbursement this Period

157.18
--------

Transaction ID : SB17.4295

**c. Rania Batrice**

Mailing Address 2824 Grand Ave

City	State	Zip Code
Des Moines	IA	50312

Purpose of Disbursement  
In-kind - Office Supplies, Transportation, & Food

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		24		2015

Amount of Each Disbursement this Period

1121.31
---------

Transaction ID : SB17.4337

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1360.73

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

**A. Rania Batrice**

Mailing Address 2824 Grand Ave

City	State	Zip Code
Des Moines	IA	50312

Purpose of Disbursement  
Reimbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Disbursement this Period

1955.71
---------

Transaction ID : SB17.4308

**B. American Airlines**

Mailing Address PO Box 619616

City	State	Zip Code
DFW Airport	TX	75261-9616

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Disbursement this Period

356.20
--------

Transaction ID : SB17.4308.0

[MEMO ITEM]

**C. Southwest Airlines**

Mailing Address 2702 Love Field Dr.

City	State	Zip Code
Dallas	TX	75235

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Disbursement this Period

460.50
--------

Transaction ID : SB17.4308.1

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1955.71



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

**A. Grand Colony**

Mailing Address 319 7th St.

City	State	Zip Code
Des Moines	IA	50309

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Disbursement this Period

1139.01
---------

Transaction ID : SB17.4308.2

[MEMO ITEM]

**B. Political C.F.O.s., Inc.**

Mailing Address 2452 Vale Way

City	State	Zip Code
Erie	CO	80516

Purpose of Disbursement  
Accounting & Compliance Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Disbursement this Period

450.00
--------

Transaction ID : SB17.4286

**c. Adam Schantz**Mailing Address 2824 Grand Ave.  
Unit 309

City	State	Zip Code
Des Moines	IA	50312

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Disbursement this Period

1851.30
---------

Transaction ID : SB17.4301

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2301.30

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

**A. Adam Schantz**Mailing Address 2824 Grand Ave.  
Unit 309City State Zip Code  
Des Moines IA 50312Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Disbursement this Period

2004.67
---------

Transaction ID : SB17.4304

**B. Adam Schantz**Mailing Address 2824 Grand Ave.  
Unit 309City State Zip Code  
Des Moines IA 50312Purpose of Disbursement  
Reimbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Disbursement this Period

358.20
--------

Transaction ID : SB17.4306

**C. Nation Builder**Mailing Address 520 S. Grand Ave  
2nd FloorCity State Zip Code  
Los Angeles CA 90071Purpose of Disbursement  
Software License Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Disbursement this Period

358.20
--------

Transaction ID : SB17.4306.0

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2362.87

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

**A. Signapay**Mailing Address 105 Decker Court  
Suite 650City State Zip Code  
Irving TX 75062Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Disbursement this Period

72.25
-------

Transaction ID : SB17.4292

**B. Josh L. Skipworth**

Mailing Address 150 NE 41st St., #312

City State Zip Code  
Ankeny IA 50021Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Disbursement this Period

2310.69
---------

Transaction ID : SB17.4302

**c. Josh L. Skipworth**

Mailing Address 150 NE 41st St., #312

City State Zip Code  
Ankeny IA 50021Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Disbursement this Period

1154.84
---------

Transaction ID : SB17.4305

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3537.78

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

**A. The Public Relations Project**

Mailing Address 4400 EP True Pkwy, Unit 52

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		28		2015

City	State	Zip Code
West Des Moines	IA	50265

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Communications Consulting ServicesCategory/  
Type

Transaction ID : SB17.4288

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Chay Williams**

Mailing Address 7020 Cheridan Circle

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2015

City	State	Zip Code
Urbandale	IA	50322

Amount of Each Disbursement this Period

858.85
--------

Purpose of Disbursement  
PayrollCategory/  
Type

Transaction ID : SB17.4307

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1858.85

16793.74



**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 22 OF 22

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Adams for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Rania Batrice**

Nature of Debt (Purpose):

General Campaign Consulting

Mailing Address 2824 Grand Ave

City State

Zip Code

Des Moines

IA

50312

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4334

Amount Incurred This Period

7500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Political C.F.O.s., Inc.**

Nature of Debt (Purpose):

Accounting &amp; Compliance Services

Mailing Address 2452 Vale Way

City State

Zip Code

Erie

CO

80516

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4333

Amount Incurred This Period

5750.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5750.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

13250.00

2) **TOTALS** This Period (last page this line number only) ..... ▶

13250.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

13250.00